

# CLAIMS ONLY

Application Number

101733450

Filing Date

Applicant(s)

May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	/					
2		/				
3		/				
4		/				
5		/				
6		/				
7		/				
8		/				
9		/				
10		/				
11		/				
12		/				
13		/				
14		/				
15		/				
16		/				
17		/				
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28		/				
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31		/				
32		/				
33		/				
34		/				
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36		/				
37		/				
38		/				
39		/				
40		/				
41		/				
42		/				
43		/				
44		/				
45		/				
46		/				
47		/				
48		/				
49		/				
50		/				
Total Indep	2					
Total Depend	38					
Total Claims	40					

  

	Indep		Depend		Indep		Depend	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
51	/							
52		/						
53		/						
54		/						
55		/						
56		/						
57		/						
58		/						
59		/						
60		/						
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89		/						
90		/						
91		/						
92		/						
93		/						
94		/						
95		/						
96		/						
97		/						
98		/						
99		/						
100		/						
Total Indep	1							
Total Depend	2							
Total Claims	2							